

**LOBBYING SUPPLEMENTAL REGISTRATION FORM**

To be used for changes to registrations and terminations.

**Instructions**

- Print in ink or type.
- Complete form, have it notarized and return with \$10 fee to Board of Ethics, 8401 United Plaza Blvd., Suite 200 Baton Rouge LA 70809-7017, (225) 922-1400.
- This form must be submitted within 5 days of any changes in your registration form to add employers or those you represent or if you cease all activities requiring registration. It must be submitted within 10 days of any terminations of employment or representations.

**FOR OFFICE USE ONLY**

Postmark Date: 10-7-99

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\$10.00 gm

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ETHICS

1. NAME ADAM GINGER E  
Last First MI2. BUSINESS PHONE 225-802 51033. BUSINESS ADDRESS 10 BRENT COURT BATON ROUGE LA 70808-9044  
Street and No. City State Zip4. EMPLOYER SELF5. EMPLOYER'S ADDRESS SAME  
Street and No. City State Zip6. Have you ceased or terminated all lobbying activities requiring registration? Yes \_\_\_\_\_ No X

7. LIST BELOW (a) Names of persons, groups, or organizations which you are adding or eliminating; (b) the address of each such person, group, or organization listed; (c) the type of business each is engaged in or the purpose or function of the organization or group; (d) whether or not the client or someone else pays you to lobby; and (e) the date of termination if applicable.

1. Name UNITED STATES MARITIME ALLIANCE, LTD  
 Address 2 WORLD TRADE CENTER - 20TH FLOOR NEW YORK, NY  
 Business or purpose NON PROFIT ORGANIZATION REPRESENTING BUSINESSES 10048-0075  
IN MARITIME INDUSTRY  
☒ New Representation  
 Does this person pay you? YES  
 If No, who pays you? \_\_\_\_\_

☐ Terminated Representation as of \_\_\_\_\_

## SUPPLEMENTAL REGISTRATION FORM



2. Name \_\_\_\_\_

Address \_\_\_\_\_

Business or purpose \_\_\_\_\_

☐ New Representation  
Does this person pay you? \_\_\_\_\_

If No, who pays you? \_\_\_\_\_

☐ Terminated Representation as of \_\_\_\_\_

3. Name \_\_\_\_\_

Address \_\_\_\_\_

Business or purpose \_\_\_\_\_

☐ New Representation  
Does this person pay you? \_\_\_\_\_

If No, who pays you? \_\_\_\_\_

☐ Terminated Representation as of \_\_\_\_\_State of LOUISIANAParish of EAST BATON ROUGE

Before me, the undersigned authority, personally came and appeared GINGER E. ADAM who,  
after being duly sworn by me, did declare and acknowledge to me that the above statements are true and correct.

  
Signature of LobbyistSworn to and subscribed before me on this 7/15 day of June, 1999.  
Notary Public